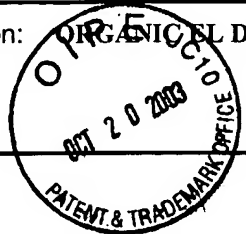
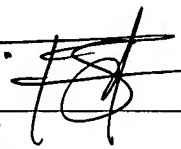




10-21-03 41

2875

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>			<b>Docket No.</b> 07200.017001		
Applicant(s): Yohei MAYUZUMI					
<b>Serial No.</b> 10/031,781	<b>Filing Date</b> 01/23/2002	<b>Examiner</b> Sumati Krishnan		<b>Group Art Unit</b> 2875	
Invention: ORGANIC EL DISPLAY AND METHOD FOR MANUFACTURING ORGANIC EL DISPLAY					
 <b>TO THE COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	<b>CLAIMS REMAINING AFTER AMENDMENT</b>	<b>HIGHEST # PREV. PAID FOR</b>	<b>NUMBER EXTRA CLAIMS PRESENT</b>	<b>RATE</b>	<b>ADDITIONAL FEE</b>
TOTAL CLAIMS	3 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	10 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
<div style="float:right; text-align:right; border: 1px solid black; padding: 5px; transform: rotate(90deg);">RECEIVED OCT 27 2003 TECHNOLOGY CENTER 2809</div> <div style="clear:both"></div> <div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0591 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div>					
<div style="display:flex; justify-content:space-between; align-items:flex-end;"><div style="width:45%; text-align:center;"> #45,079 <i>Signature</i></div><div style="width:45%; text-align:right;">Dated: 10/20/03</div></div> <div style="clear:both"></div> <div><div>Jonathan P. Osha, Reg. No. 33,986 ROSENTHAL &amp; OSHA L.L.P. 1221 McKinney, Suite 2800 Houston, Texas 77010 Telephone: (713) 228-8600 Facsimile: (713) 228-8778</div><div style="border: 1px solid black; padding: 5px; margin-top: 10px; width: fit-content;"><div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="border-top: 1px solid black; margin-top: 10px;"><i>Signature of Person Mailing Correspondence</i></div><div style="border-top: 1px solid black; margin-top: 10px;"><i>Typed or Printed Name of Person Mailing Correspondence</i></div></div></div> <div style="clear:both"></div> <div>CC:</div>					